

| POSITION | ID NO. | DATE |
|-------------|--------|---------|
| CLASSIFIER | 20 | 1/16/95 |
| EXAMINER | 289 | 1/22 |
| TYPIST | 505 | 3/14/96 |
| VERIFIER | WAW | 3/15/96 |
| CORPS CORR. | | |
| SPEC. HAND | 414 | 3-5-91 |
| FILE MAINT. | 452 | 1-29-95 |
| DRAFTING | | |

INDEX OF CLAIMS

| Claim | Date |
|-------|------|
| 1 | 1/12 |
| 2 | 1/15 |
| 3 | 1/15 |
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(LEFT SIDE)